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**FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526**

**SERIAL NO.: 10/711,538**

**ATTORNEY DOCKET NO.: REAP0144USA**

**SUBJECT: INFORMATION DISCLOSURE STATEMENT**

**TOTAL PAGES: 46 PAGES (INCLUDING COVER PAGE)**

**Winston Hsu 2004/11/18**

**REAP0144USA0\_D1\_1**

PTO/SB/97 (09-04)

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(1) Transmittal Form	1 PAGE
(2) Fee Transmittal	1 PAGE
(3) Information Disclosure Statement	42 PAGES

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FORM

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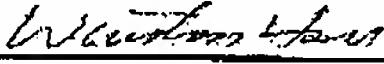
44

Application Number	10/711,538
Filing Date	09/24/2004
First Named Inventor	Behzad Razavi
Art Unit	2817
Examiner Name	Mottola, Steven J
Total Number of Pages in This Submission	44
Attorney Docket Number	REAP0144USA

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	NOV 18 2004	Reg. No.	41,526

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

## Complete If Known

Application Number	10/711,538
Filing Date	09/24/2004
First Named Inventor	Behzad Razavi
Examiner Name	Mottola, Steven J
Art Unit	2817
Attorney Docket No.	REAP0144USA

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None
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Deposit Accounts Number  
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The Director is authorized to: (check all that apply)  
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 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	780	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)		(\$ 0.00)			

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		-20** =		
		-3** =		

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	44	Independent claims in excess of 3	
1203	300	2203	150	Multiple dependent claim, if not paid	
1204	88	2204	44	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$ 0.00)			

\*\*or number previously paid, if greater. For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	430	2252	215	Extension for reply within second month	
1253	980	2263	490	Extension for reply within third month	
1254	1,530	2254	765	Extension for reply within fourth month	
1255	2,080	2255	1,040	Extension for reply within fifth month	
1401	340	2401	170	Notice of Appeal	
1402	340	2402	170	Filing a brief in support of an appeal	
1403	300	2403	150	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	685	Petition to revive - unintentional	
1501	1,370	2501	685	Utility issue fee (or reissue)	
1502	490	2502	245	Design issue fee	
1503	660	2503	330	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2601	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$ 0.00)					

(Complete if applicable)

Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent)	41,526	Telephone 302-729-1562
Signature	Winston Hsu		Date NOV 18 2004	

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PTO/SB/088 (08-03)

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<p>Substitute for form 1449/PTO</p> <p><b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b></p> <p><i>(Use as many sheets as necessary)</i></p>		<b>Complete if Known</b>	
		<b>Application Number</b>	10/711,538
		<b>Filing Date</b>	09/24/2004
		<b>First Named Inventor</b>	Behzad Razavi
		<b>Art Unit</b>	2817
		<b>Examiner Name</b>	Mottola, Steven J
<b>Sheet</b>	1	<b>of</b>	1
		<b>Attorney Docket Number</b>	REAP0144USA

## NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

**1** Applicant's unique citation designation number (optional). **2** Applicant is to place a check mark here if English language Translation is attached.  
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